PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: 09945018

CLAIMS AS FILED – PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA	SMALL ENTITY RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE (37 CFR 1.16(a))				$	OR		$
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =		X $ =		OR	X $ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =		X $ =		OR	X $ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ $ =		OR	+ $ =	
			TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	13	Minus	** 49	= 0	X $ =		OR	X $ =	
Independent (37 CFR 1.16(b))	2	Minus	*** 5	= 0	X $ =		OR	X $ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ =		OR	+ $ =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	16	Minus	** 49	=	X $ =		OR	X $ =	
Independent (37 CFR 1.16(b))	2	Minus	*** 3	=	X $ =		OR	X $ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ =		OR	+ $ =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C — 12/27/05

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	14	Minus	** 49	=	X $ =		OR	X $ =	
Independent (37 CFR 1.16(b))	2	Minus	*** 5	=	X $ =		OR	X $ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ =		OR	+ $ =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number

09945018

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)		SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
				RATE	FEE		RATE	FEE
TOTAL CLAIMS	49			BASIC FEE	355.00	OR	BASIC FEE	740.00
FOR	NUMBER FILED	NUMBER EXTRA						
TOTAL CHARGEABLE CLAIMS	49 minus 20=	29		X$ 9=	261	OR	X$18=	522
INDEPENDENT CLAIMS	5 minus 3 =	2		X40=	80	OR	X80=	168
MULTIPLE DEPENDENT CLAIM PRESENT		☐		+135=		OR	+270=	
				TOTAL	696	OR	TOTAL	1430

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
AMENDMENT A	Total	49	Minus	49	0		X$ 9=		OR	X$18=	0
	Independent	5	Minus	5	0		X40=		OR	X80=	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐						+135=		OR	+270=	0
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
AMENDMENT B	Total	49	Minus	49	0		X$ 9=		OR	X$18=	0
	Independent	5	Minus	5	0		X40=		OR	X80=	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐						+135=		OR	+270=	0
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0

7-6-04

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
AMENDMENT C	Total	44	Minus	49	0		X$ 9=		OR	X$18=	0
	Independent	7	Minus	5	2		X40=		OR	X80= 86	172
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐						+135=		OR	+270=	0
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	172

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.